

**2019 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L18000089065

**Entity Name:** SKYLINE RESERVE LLC

**Current Principal Place of Business:**

445 NW 19TH ST  
MIAMI, AL 33136

**Current Mailing Address:**

445 NW 19TH ST  
MIAMI, AL 33136 US

**FEI Number:** 82-5180091

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

BENNETT, RANDY G  
445 NW 19TH ST  
MIAMI, FL 33136 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** RANDY BENNETT

12/09/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	P	Title	VP
Name	BENNETT, RANDY G	Name	BENNETT, YADICSA N
Address	445 NW 19TH ST	Address	445 NW 19TH ST
City-State-Zip:	MIAMI FL 33136	City-State-Zip:	MIAMI FL 33136

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** RANDY BENNETT

**PRESIDENT**

12/09/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date